

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 94

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wetterau, T. Conrad, , Mr.,

Mailing Address PO Box 671

City
Taunton

State
MA

Zip Code
02780-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Quality Beverage L.P.

Occupation (for Individual)
President/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 23 / 2021

Transaction ID : AF1BAB9ACFDBB4A1B92

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wills, Robert, , Mr.,

Mailing Address PO Box 323

City
Onalaska

State
WI

Zip Code
54650-0323

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LaCrosse Beverage, LLC

Occupation (for Individual)
Vice President and COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2021

Transaction ID : A902A5E9C630F445C832

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wirtz, W. Rockwell, , Mr.,

Mailing Address 680 N Lake Shore Dr
FI 19

City
Chicago

State
IL

Zip Code
60611-4548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Breakthru Beverage Minnesota

Occupation (for Individual)
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2021

Transaction ID : AE4D8BC8E8280426B8AF

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

15000.00

TOTAL This Period (last page this line number only)..... ►